#### **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000003577

Entity Name: BEAVER STREET ENTERPRISE CENTER, INC.

FILED
Apr 09, 2021
Secretary of State
3880396073CC

## **Current Principal Place of Business:**

1225 W. BEAVER ST JACKSONVILLE, FL 32204

## **Current Mailing Address:**

1225 W. BEAVER ST

JACKSONVILLE, FL 32204 US

FEI Number: 59-3679602 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

LEE III, ROBERT V DR. 1131 LAURA STREET JACKSONVILLE, FL 32206 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DR. ROBERT V. LEE III 04/09/2021

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title **PRESIDENT** Title SECRETARY Name BLANCHARD, PAT Name DIXON, DEBRA 6655 CRYSTAL RIVER ROAD E. Address Address 1225 W. BEAVER ST JACKSONVILLE FL 32204 JACKSONVILLE FL 32219 City-State-Zip: City-State-Zip:

TitleDIRECTORTitleDIRECTORNameBOYDSTON, BRENDANameBUTLER, CORD

Address 7335 BARBERIE STREET Address THE CORDELL GROUP, COMMERCIAL REAL ESTATE SERVICES

City-State-Zip: JACKSONVILLE FL 32208 60 OCEAN BOULEVARD, SUITE 15

City-State-Zip: ATLANTIC BEACH FL 32233

Title DIRECTOR

Name FURQAN, HANAN Title DIRECTOR

Address THREEZ COMPANY Name HAMMOND, THADDEUS

1225 W. BEAVER STREET
Address
U.S. SMALL BUSINESS

City-State-Zip: JACKSONVILLE FL 32204 ADMINISTRATION

7825 BAYMEADOWS WAY, SUITE100B

Title DIRECTOR

Name MONAHAN, KEVIN City-State-Zip: JACKSONVILLE FL 32256

Address SMALL BUSINESS DEVELOPMENT Title DIRECTOR

CENTER
12000 ALUMNI DRIVE
Name
PRAY, BILL

City-State-Zip: JACKSONVILLE FL 32224-2677 Address SCORE OF NORTHEAST FLORIDA -

JACKSONVILLE FL CHAPTER 7825 BAYMEADOWS WAY -100B

City-State-Zip: JACKSONVILLE FL 32208

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DEBRA DIXON CONTROLLER 04/09/2021

# Officer/Director Detail Continued:

Title DIRECTOR

Name STEIN, JR., RICHARD

Address WELLHOUSE COMPANY

1 INDEPENDENT DRIVE, SUITE 3125

City-State-Zip: JACKSONVILLE FL 32202

Title EXECUTIVE DIRECTOR

Name JOHNSON, THERESA

Address 1225 W. BEAVER ST

City-State-Zip: JACKSONVILLE FL 32204

Title DIRECTOR

Name TORRES, GLENDA

Address ASSISTANT VICE PRESIDENT -

STORE MGR., TD BANK 4520 SAN JUAN AVENUE

City-State-Zip: JACKSONVILLE FL 32210